SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete	A. Signature
item 4 if Restricted Delivery is desired. Print your name and address on the reverse	X Jan Year & Dace Addresse
so that we can return the card to you.	B. Received by (Printed Name) C. Date of Deliver
Attach this card to the back of the mailplece, or on the front if space permits.	Princene Spacen 1421/67
	D. Is delivery address different from item 1? Yes
Article Addressed to:	If YES, enter delivery address below: No
Mr. Tracy Dunnican	
Frank Lee Youth Center	
PO Box 220410	
Deatsville, AL 36022	3. Service Type
Deatsville, AL 30022	Registered
	☐ Insured Mail ☐ C.O.D.
* D'levidio	4. Restricted Delivery? (Extra Fee)
2. Article Number	
(Transfer from service label) 7006	2760 0005 4873 2229
PS Form 3811, February 2004 Domestic	Return Receipt 102595-02-M-15
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A. Signature
Print your name and address on the reverse	This come S. Decar - Address
so that we can return the card to you.	B. Received by (Printed Name) C. Date of Delive
Attach this card to the back of the mailpiece, or on the front if space permits.	Hincene J. Dean illail 17
1. Article Addressed to:	D. is delivery address different from item 1? Yes If YES, enter delivery address below: No
	If YES, enter delivery address below: No
Mr. Windon McGhee	i ∦ ·
Frank Lee Youth Center	
PO Box 220410	
Deatsville, AL 36022	3. Service Type
BCdtSvine, AE CCC22	Certified Mall
	☐ Registered ☐ Return Receipt for Merchandi ☐ Insured Mail ☐ C.O.D.
0 1cu 1012	4. Restricted Delivery? (Extra Fee)
2. Article Number	Tressesses Bellioty ((2004 / 66)
(Transfer from service label) 7006 2	760 0005 4873 2205
PS Form 3811, February 2004 Domestic	Return Receipt 102595-02-M-19
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete	A. Signature
item 4 if Restricted Delivery is desired. Print your name and address on the reverse	Agent
so that we can return the card to you.	B Booking by (Briston Mary) O Date (B)
Attach this card to the back of the mailpiece.	B. Received by (Printed Name) C. Date of Delivery (Printed Name)
or on the front if space permits.	Princene 5 Dean 1/21/27 D. Is delivery address different from item 1? Yes
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
Mr. Levan Thomas	
Frank Lee Youth Center	
PO Box 220410	3 Service Tune
Deatsville, AL 36022	3. Service Type Gertified Mail
	☐ Registered ☐ Return Receipt for Merchandi
A72.1112	☐ Insured Mail ☐ C.O.D.
<u> </u>	4. Restricted Delivery? (Extra Fee)
2. Article Number	מו ששות החמר המשם ששים
2. Article Number	OL 2760 0005 4873 2212